09841605

application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

206339 USO

CLAIMS AS FILED - PART I							•	SMALL ENTITY			OTHER THAN	
			(Column 1)					TYPE		OR	SMALL	
TOTAL CLAIMS			8					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			()minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		·		/	X40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+135=		OR	+270=	270
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	'0" in column 2		TOTAL		OR	· TOTAL	980
CLAIMS AS AMENDED					- PART II			•		• ,	OTHER	THAN
		(Column 1)		(Colu		(Column 3)	_	SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	· · · · · · · · · · · · · · · · · · ·	Independent • Minus FIRST PRESENTATION OF MULTIPLE DEF		***	F CLAIM	=	1	X40=		OR	X80=	
THE THE SENTENCE OF WISEIN EL DEI CHOCKY CENTRE								+135=		OR	+270=	
	•							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)				•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATÉ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	- OL ADA	<u> </u> =		X40=		OR	X80=	
<u> </u>	FIRST PHESE	NTATION OF MO	JETIPLE DEF	ENDEN	CLAIM		_	+135=		OR	+270=	
							L	TOTAL		∩ □	TOTAL	
(0.1								ADDIT. FEE	· · - <u>· · · · · · · · ·</u> · ·	•	ADDIT. FEE	
_		(Column 1) CLAIMS	7	(Colui		(Column 3)	7 -			. 1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus .	**		=] [X\$ 9=		OR	X\$18=	ij
	Independent	*	Minus	***	F 01 111	<u> -</u>	1	X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
* If the entry in column 1 is less than the intry in column 2, write "0" in column 3.										ΛP	TOTAL	
***	If the "Highest Nu	mber Previously P	aid For" IN THI	S SPACE	is I ss tha	n 3, enter "3."		DDIT. FEE			ADDIT. FEE	
	ne "Highest Nun	nber Previously Pai	id For" (Total o	r Independ	nt) is the	highest numb	er fou	nd in the app	ropriate box	in co	lumn 1.	